

County: Waupaca
PINE MANOR HEALTH CARE CENTER
VILLAGE OF EMBARRASS

Facility ID: 7210

Page 1

CLINTONVILLE 54929 Phone: (715) 823-3135
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/00): 78
Total Licensed Bed Capacity (12/31/00): 82
Number of Residents on 12/31/00: 60

Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified?
Average Daily Census:

Corporation
Skilled
No
Yes
61

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	23.3
Supp. Home Care-Personal Care	No					1 - 4 Years	40.0
Supp. Home Care-Household Services	No	Developmental Disabilities	1.7	Under 65	6.7	More Than 4 Years	36.7
Day Services	No	Mental Illness (Org./Psy)	51.7	65 - 74	13.3		
Respite Care	Yes	Mental Illness (Other)	15.0	75 - 84	33.3		100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	40.0	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.7	Full-Time Equivalent	
Congregate Meals	No	Cancer	1.7			Nursing Staff per 100 Residents	
Home Delivered Meals	Yes	Fractures	3.3		100.0	(12/31/00)	
Other Meals	No	Cardiovascular	8.3	65 & Over	93.3		
Transportation	No	Cerebrovascular	10.0			RNs	8.8
Referral Service	No	Diabetes	0.0	Sex	%	LPNs	7.5
Other Services	Yes	Respiratory	1.7			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	6.7	Male	38.3	Aides & Orderlies	
Mentally Ill	No			Female	61.7		34.3
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other			Private Pay		Managed Care			Total	Percent Of All Residents	
	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%			Per Diem Rate
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	2	100.0	\$310.62	45	95.7	\$77.47	1	100.0	\$94.00	10	100.0	\$119.00	0	0.0	\$0.00	58	96.7%
Intermediate	---	---	---	2	4.3	\$65.34	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	2	3.3%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	2	100.0		47	100.0		1	100.0		10	100.0		0	0.0		60	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Percent Admissions from:						
Private Home/No Home Health	17.8	Bathing	6.7	58.3	35.0	60
Private Home/With Home Health	0.0	Dressing	11.7	61.7	26.7	60
Other Nursing Homes	6.7	Transferring	26.7	53.3	20.0	60
Acute Care Hospitals	66.7	Toilet Use	13.3	50.0	36.7	60
Psych. Hosp. -MR/DD Facilities	2.2	Eating	26.7	60.0	13.3	60
Rehabilitation Hospitals	0.0	*****				
Other Locations	6.7	Continence		%	Special Treatments	%
Total Number of Admissions	45	Indwelling Or External Catheter	3.3		Receiving Respiratory Care	0.0
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	65.0		Receiving Tracheostomy Care	0.0
Private Home/No Home Health	36.5	Occ/Freq. Incontinent of Bowel	36.7		Receiving Suctioning	0.0
Private Home/With Home Health	3.8				Receiving Ostomy Care	1.7
Other Nursing Homes	7.7	Mobility			Receiving Tube Feeding	0.0
Acute Care Hospitals	7.7	Physically Restrained	23.3		Receiving Mechanically Altered Diets	58.3
Psych. Hosp. -MR/DD Facilities	1.9				Other Resident Characteristics	
Rehabilitation Hospitals	0.0	Skin Care			Have Advance Directives	100.0
Other Locations	1.9	With Pressure Sores	0.0		Medications	
Deaths	40.4	With Rashes	5.0		Receiving Psychoactive Drugs	33.3
Total Number of Discharges (Including Deaths)	52	*****				

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	Ownership:			Bed Size:		Licensure:		All	
	This Facility	Peer Group	Ratio	50-99	Ratio	Peer Group	Ratio	Facilities	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	74.4	83.7	0.89	86.6	0.86	87.0	0.86	84.5	0.88
Current Residents from In-County	48.3	75.1	0.64	69.4	0.70	69.3	0.70	77.5	0.62
Admissions from In-County, Still Residing	17.8	18.7	0.95	19.5	0.91	22.3	0.80	21.5	0.83
Admissions/Average Daily Census	73.8	152.8	0.48	130.0	0.57	104.1	0.71	124.3	0.59
Discharges/Average Daily Census	85.2	154.5	0.55	129.6	0.66	105.4	0.81	126.1	0.68
Discharges To Private Residence/Average Daily Census	34.4	59.1	0.58	47.7	0.72	37.2	0.93	49.9	0.69
Residents Receiving Skilled Care	96.7	90.6	1.07	89.9	1.08	87.6	1.10	83.3	1.16
Residents Aged 65 and Older	93.3	95.0	0.98	95.4	0.98	93.4	1.00	87.7	1.06
Title 19 (Medicaid) Funded Residents	78.3	65.4	1.20	68.7	1.14	70.7	1.11	69.0	1.14
Private Pay Funded Residents	16.7	23.2	0.72	22.6	0.74	22.1	0.75	22.6	0.74
Developmentally Disabled Residents	1.7	0.8	2.13	0.7	2.33	0.7	2.34	7.6	0.22
Mentally Ill Residents	66.7	31.4	2.12	35.9	1.86	37.4	1.78	33.3	2.00
General Medical Service Residents	6.7	23.2	0.29	20.1	0.33	21.1	0.32	18.4	0.36
Impaired ADL (Mean)	55.0	48.9	1.13	47.7	1.15	47.0	1.17	49.4	1.11
Psychological Problems	33.3	44.1	0.76	49.3	0.68	49.6	0.67	50.1	0.67
Nursing Care Required (Mean)	8.1	6.5	1.24	6.6	1.24	7.0	1.15	7.2	1.14